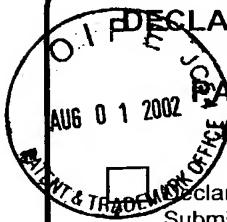


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#6



**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration
Submitted
with Initial
Filing

OR

☐ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number	4-31704A
First Named Inventor	Cheng Cheng
COMPLETE IF KNOWN	
Application Number	10/081,969
Filing Date	02/22/2002
Art Unit	
Examiner Name	

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

NOVEL ONCOLYTIC ADENOVIRAL VECTORS

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) **02/22/2002** as United States Application Number or PCT International

Application Number **10/081,969** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U S Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☒

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or Bar Code Label

001095

OR ☐

Correspondence address below

Name

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :



A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any])

Cheng

Family Name
or Surname

Cheng

Inventor's
Signature



Date

July 3, 2002

Rockville

MD

US

China

Residence: City

State

Country

Citizenship

12004 Montrose Village Terrace

Mailing Address

Rockville

MD

20852

US

City

State

ZIP

Country

NAME OF SECOND INVENTOR:



A petition has been filed for this unsigned inventor

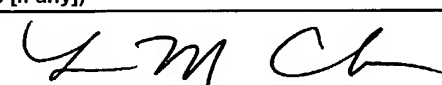
Given Name
(first and middle [if any])

Lori

Family Name
or Surname

Clarke

Inventor's
Signature



Date

July 2, 2002

Olney

MD

US

US

Residence: City

State

Country

Citizenship

17608 Stafford Court

Mailing Address

Olney

MD

21754

US

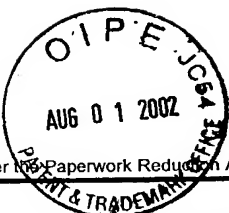
City

State

ZIP

Country

☐ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.



PTO/SB/02A (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>5</u>
--------------------	---

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Sheila		Connelly	
Given Name		Family Name or Surname	
Inventor's Signature <i>Sheila Connelly</i>		Date <i>15-July-02</i>	
Ijamsville	MD	US	US
Residence: City	State	Country	Citizenship
11012 Graymarsh Place			
Mailing Address			
Mailing Address			
Ijamsville	MD	21754	US
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
David Leonard		Ennist	
Given Name		Family Name or Surname	
Inventor's Signature <i>David Leonard</i>		Date <i>9-July-2002</i>	
Bethesda	MD	US	US
Residence: City	State	Country	Citizenship
9715 DePaul Drive			
Mailing Address			
Mailing Address			
Bethesda	MD	20817	US
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Suzanne		Forry-Schaudies	
Given Name		Family Name or Surname	
Inventor's Signature <i>Suzanne Forry-Schaudies</i>		Date <i>9-July-02</i>	
Rockville	MD	US	US
Residence: City	State	Country	Citizenship
14801 Marlin Terrace			
Mailing Address			
Mailing Address			
Rockville	MD	20853	US
City	State	ZIP	Country

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of 5	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Mario		Gorziglia	
Given Name		Family Name or Surname	
		<div style="display: flex; justify-content: space-between;"> <div>Date</div> <div>July 19, 2002</div> </div>	
Doylestown		US	
Residence: City		State Country	
92 Abbey Circle		5126 Harmony Court South	
Mailing Address		H6	
Mailing Address			
Doylestown		18901	
City		State ZIP Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Paul L.		Hallenbeck	
Given Name		Family Name or Surname	
		<div style="display: flex; justify-content: space-between;"> <div>Date</div> <div>July 15, 2002</div> </div>	
Gaithersburg		US	
Residence: City		State Country	
7461 Rosewood Manor Lane		US	
Mailing Address		Citizenship	
Mailing Address			
Gaithersburg		20882	
City		State ZIP Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Carl M.		Hay	
Given Name		Family Name or Surname	
		<div style="display: flex; justify-content: space-between;"> <div>Date</div> <div>7-3-02</div> </div>	
Damasus		US	
Residence: City		State Country	
28301 Honeysuckle Drive		US	
Mailing Address		Citizenship	
Mailing Address			
Damasus		20872	
City		State ZIP Country	

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>3</u> of <u>5</u>
--------------------	---

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
John Leonard		Jakubczak	
<small>Given Name</small>		<small>Family Name or Surname</small>	
 <small>Inventor's Signature</small>		July 3, 2002 <small>Date</small>	
Germantown	MD	US	US
<small>Residence: City</small>	<small>State</small>	<small>Country</small>	<small>Citizenship</small>
12926 Summit Ridge Terrace			
<small>Mailing Address</small>			
Germantown			
<small>City</small>	MD	20874	US
<small>State</small>	<small>ZIP</small>	<small>Country</small>	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Michael		Kaleko	
<small>Given Name</small>		<small>Family Name or Surname</small>	
 <small>Inventor's Signature</small>		Date	
Rockville	MD	US	US
<small>Residence: City</small>	<small>State</small>	<small>Country</small>	<small>Citizenship</small>
8 Hearthstone Court			
<small>Mailing Address</small>			
Rockville			
<small>City</small>	MD	20854	US
<small>State</small>	<small>ZIP</small>	<small>Country</small>	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Sandrina		Phipps	
<small>Given Name</small>		<small>Family Name or Surname</small>	
 <small>Inventor's Signature</small>		Date	
Reston	VA	US	US
<small>Residence: City</small>	<small>State</small>	<small>Country</small>	<small>Citizenship</small>
2319 Rosedown Drive			
<small>Mailing Address</small>			
Reston			
<small>City</small>	VA	20191	US
<small>State</small>	<small>ZIP</small>	<small>Country</small>	

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>3</u> of <u>5</u>
--------------------	---

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
John Leonard		Jakubczak	
Given Name	Family Name or Surname		
Inventor's Signature		Date	
Germantown	MD	US	US
Residence: City	State	Country	Citizenship
12926 Summit Ridge Terrace			
Mailing Address			
Mailing Address			
Germantown	MD	20874	US
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Michael		Kaleko	
Given Name	Family Name or Surname		
Inventor's Signature		Date	
Rockville	MD	US	US
Residence: City	State	Country	Citizenship
8 Hearthstone Court			
Mailing Address			
Mailing Address			
Rockville	MD	20854	US
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Sandrina		Phipps	
Given Name	Family Name or Surname		
Inventor's Signature		Date	
Reston	VA	US	US
Residence: City	State	Country	Citizenship
2319 Rosedown Drive			
Mailing Address			
Mailing Address			
Reston	VA	20191	US
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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 4 of 5

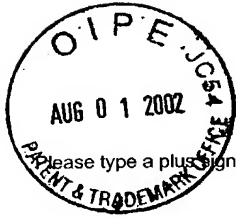
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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>5</u> of <u>5</u>
-------------	---

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Yuefeng		Xie	
Given Name		Family Name or Surname	
Inventor's Signature 		Date July 1, 2002	
Germantown	MD	US	China
Residence: City	State	Country	Citizenship
13921 Rockingham Road			
Mailing Address			
Mailing Address			
Germantown		MD	20874
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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PTO/SB/81 (02-01)

Approved for use through 10/31/2002 OMB 0651-0035

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/081,969
Filing Date	02/22/2002
First Named Inventor	Lori Clarke
Title	Novel Oncolytic Adenoviral Vectors
Group Art Unit	
Examiner Name	
Attorney Docket Number	4-31704A

I hereby appoint:

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001095

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☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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☒ The above-mentioned Customer Number.

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Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Cheng Cheng

Signature

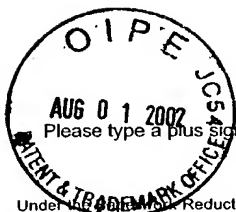
Date

July 3, 2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 15 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



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PTO/SB/81 (02-01)

Approved for use through 10/31/2002 OMB 0651-0035

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Application Number	10/081,969
Filing Date	02/22/2002
First Named Inventor	Lori Clarke
Title	Novel Oncolytic Adenoviral Vectors
Group Art Unit	
Examiner Name	
Attorney Docket Number	4-31704A

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☐ Firm or
Individual Name

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Address

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State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name Lori Clarke

Signature

L M Clarke

Date

May 3, 2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 14 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



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PTO/SB/81 (02-01)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/081,969
Filing Date	02/22/2002
First Named Inventor	Lori Clarke
Title	Novel Oncolytic Adenoviral Vectors
Group Art Unit	
Examiner Name	
Attorney Docket Number	4-31704A

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☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Individual Name

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Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Sheila Connelly
Signature	<i>Sheila Connelly</i>
Date	May 2, 2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 14 15 forms are submitted.

Burden Hour Statement. This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231



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PTO/SB/81 (02-01)
Approved for use through 10/31/2002 OMB 0651-0035

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/081,969
Filing Date	02/22/2002
First Named Inventor	Lori Clarke
Title	Novel Oncolytic Adenoviral Vectors
Group Art Unit	
Examiner Name	
Attorney Docket Number	4-31704A

I hereby appoint:

☒ Practitioners at Customer Number

001095

Place Customer
Number Bar Code
Label here

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	David Leonard Ennist
Signature	<i>David L. Ennist</i>
Date	9-May-2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 14 15 forms are submitted.

Burden Hour Statement This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO Assistant Commissioner for Patents, Washington, DC 20231



Please type a plus sign (+) inside this box ☒

U.S. PATENT AND TRADEMARK OFFICE, WASHINGTON, DC 20231

PTO/SB/81 (02-01)

Approved for use through 10/31/2002 OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/081,969
Filing Date	02/22/2002
First Named Inventor	Lori Clarke
Title	Novel Oncolytic Adenoviral Vectors
Group Art Unit	
Examiner Name	
Attorney Docket Number	4-31704A

I hereby appoint:

☒ Practitioners at Customer Number

001095

Place Customer
Number Bar Code
Label here

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number.

OR

☐ Practitioners at Customer Number

Place Customer
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☐ Firm or
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Suzanne Forry-Schaudies

Signature

Suzanne Forry-Schaudies

Date

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☒ *Total of 15 forms are submitted.

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/081,969
Filing Date	02/22/2002
First Named Inventor	Lori Clarke
Title	Novel Oncolytic
Group Art Unit	Adenoviral Vectors
Examiner Name	
Attorney Docket Number	4-31704A

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☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Mario Gorziglia

Signature

Mario Gorziglia

Date

5/18/02

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SIGNATURE of Applicant or Assignee of Record

Name

Paul L. Hallenbeck

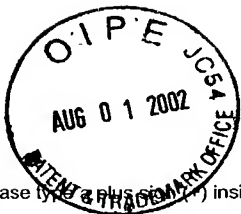
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SIGNATURE of Applicant or Assignee of Record

Name

Carl M. Hay

Signature

Carl M. Hay

Date

5/9/02

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Name	Michael Kaleko
Signature	
Date	May 8, 2002

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SIGNATURE of Applicant or Assignee of Record

Name

Sandrina Phipps

Signature

Sandrina Phipps

Date

May 3, 2002

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Name Seshidhar Reddy Police

Signature P. Seshidhar Reddy

Date 9 May 02

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Name

Patricia Clare Ryan

Signature

Patricia Clare Ryan

Date

May 30, 2002

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SIGNATURE of Applicant or Assignee of Record

Name

David A. Stewart

Signature

David A. Stewart

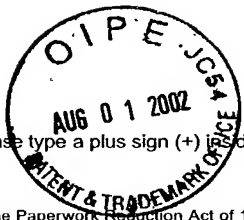
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Yuefeng Xie

Signature

x

Date

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